

Superior Court Employees

**2018 Bi-Weekly Medical Premium Contribution Rates: Employee Only**

**Medical: Employee Only**

	BLUE SHIELD OF CALIFORNIA		ACCESS+ HMO		KAISER PERMANENTE HMO		CITY PLAN PPO	
	TRIO HMO	TRIO HMO	ACCESS+ HMO	ACCESS+ HMO	TRIO HMO	TRIO HMO	TRIO HMO	TRIO HMO
	Employer Pays	Employee Pays	Employer Pays	Employee Pays	Employer Pays	Employee Pays	Employer Pays	Employee Pays
Superior Court Employees Local 21								
Superior Court Employees Local 1021								
Superior Court Judges								
Superior Court Reporters	\$326.79	\$0.00	\$364.64	\$0.00	\$283.16	\$0.00	\$408.21	\$0.00
Superior Court Staff Attorneys								
Superior Court Staff Attorneys Cash Back <sup>1</sup>								
Superior Court Interpreters								
Superior Court Unrepresented Professionals								

**Medical: Plus One**

	BLUE SHIELD OF CALIFORNIA		ACCESS+ HMO		KAISER PERMANENTE HMO		CITY PLAN PPO	
	TRIO HMO	TRIO HMO	ACCESS+ HMO	ACCESS+ HMO	TRIO HMO	TRIO HMO	TRIO HMO	TRIO HMO
	Employer Pays	Employee Pays	Employer Pays	Employee Pays	Employer Pays	Employee Pays	Employer Pays	Employee Pays
Superior Court Employees Local 21								
Superior Court Employees Local 1021								
Superior Court Judges								
Superior Court Reporters	\$651.56	\$0.00	\$727.27	\$0.00	\$564.31	\$0.00	\$796.98	\$0.00
Superior Court Staff Attorneys								
Superior Court Staff Attorneys Cash Back <sup>1</sup>								
Superior Court Interpreters								
Superior Court Unrepresented Professionals								

**Medical: Plus Two or More**

	BLUE SHIELD OF CALIFORNIA		ACCESS+ HMO		KAISER PERMANENTE HMO		CITY PLAN PPO	
	TRIO HMO	TRIO HMO	ACCESS+ HMO	ACCESS+ HMO	TRIO HMO	TRIO HMO	TRIO HMO	TRIO HMO
	Employer Pays	Employee Pays	Employer Pays	Employee Pays	Employer Pays	Employee Pays	Employer Pays	Employee Pays
Superior Court Employees Local 21	\$921.11	\$0.00	\$1,028.22	\$0.00	\$797.66	\$0.00	\$1,038.00	\$85.81
Superior Court Employees Local 1021	\$921.11	\$0.00	\$1,028.22	\$0.00	\$797.66	\$0.00	\$1,038.00	\$85.81
Superior Court Judges	\$921.11	\$0.00	\$1,028.22	\$0.00	\$797.66	\$0.00	\$1,123.81	\$0.00
Superior Court Reporters	\$921.11	\$0.00	\$1,028.22	\$0.00	\$797.66	\$0.00	\$1,038.00	\$85.81
Superior Court Staff Attorneys	\$921.11	\$0.00	\$1,028.22	\$0.00	\$797.66	\$0.00	\$1,038.00	\$85.81
Superior Court Staff Attorneys Cash Back <sup>1</sup>	\$921.11	\$0.00	\$941.08	\$87.14	\$797.66	\$0.00	\$941.08	\$182.73
Superior Court Interpreters	\$921.11	\$0.00	\$1,028.22	\$0.00	\$797.66	\$0.00	\$1,038.00	\$85.81
Superior Court Unrepresented Professionals	\$921.11	\$0.00	\$1,028.22	\$0.00	\$797.66	\$0.00	\$1,038.00	\$85.81

<sup>1</sup>Attorneys with enrolled dependents who wish to elect the cashback rate must complete additional forms. Contact SFHSS for details.

## 2018 Bi-Weekly Dental Premium Contribution Rates

### Dental

ALL SUPERIOR COURT EMPLOYEES	DELTA DENTAL PPO		DELTACARE USA DMO		UNITEDHEALTHCARE DMO	
	Employer Pays	Employee Pays	Employer Pays	Employee Pays	Employer Pays	Employee Pays
Employee Only	\$29.10	\$0.00	\$12.44	\$0.00	\$12.83	\$0.00
Employee + 1 Dependent	\$61.10	\$0.00	\$20.52	\$0.00	\$21.18	\$0.00
Employee + 2 or More Dependents	\$87.28	\$0.00	\$30.35	\$0.00	\$31.32	\$0.00

## 2018 Bi-Weekly VSP Premier Contribution Rates

Vision	VSP Premier
	Employee Cost
Employee Only	\$5.01
Employee + 1 Dependent	\$7.17
Employee + 2 or More Dependents	\$14.23